Date Phase II Application Approved (first date for reimbursement):



	State Sup	perintend	ent of Fo	lucation				
	Jiule 30	Jen nenu			onal Agency Info	rmation	X-1-1-100	
					THE RESIDENCE OF THE PARTY OF T			
Name of Local Educational Agency St. Coletta Public Charter School					Name of LEA Executive Director (Public Charter Schools Only) Sharon Raimo			
Full Address of Local Educational Agency					Email Address of LEA Executive Director (Public Charter Schools Only)			
1901 Independence Avenue, SE					sraimo@stcoletta.org			
Main Telephone Number of Local Educational Agency					Telephone Number of LEA Executive Director (Public Charter Schools Only)			
202-350-8680					202-350-8680			
Name of Primary LEA Contact for Consolidated Application Programs					Name of Additional LEA Contact for Consolidated Application Programs			
Ben Gerrard								
Position Title of Primary LEA Contact for Consolidated Application Programs					Position Title of Additional LEA Contact for Consolidated Application Programs			
Director of Foundation and Corporate Relations								
Email Address of Primary LEA Contact for Consolidated Application Programs					Email Address of Additional LEA Contact for Consolidated Application Programs			
bgerrard@stcolett	ta.org							
Telephone Numb	er of Primary LEA Cont	act for Consolidate	d Application Pro	rams	Telephone Number	of Additional LEA	Contact for Consolidated Applicat	ion Programs
202-350-8680								
- L				an fam tetlatala	the LEA is Apply	in the road		
Please note th	at allocations are s LEA Allocation for Ti \$	tle I, Part A 109,825.84		LEA Allocation fo			LEA Allocation for Title III, Part A	
including the "		or submitting re	eimbursement	requests for all	grants included in	this application	ear 2010 (July 1, 2010 - Sept n in order to maintain regula eeds.	
September 2	Monthly (12 workbo	ooks per year)	the first	BI-Monthly (6 w	orkbooks per year)		Quarterly (4 workbooks per year	in the inc
							X	
			Part	4: LEA Certif	ication of Applic	ation	TTT W TO S	11 24 24
Additionally, t		ies that it has re	ead and agrees	to all addition		ertifications in	urate to the best of its know cluded in Phase II of the app se II Application	
					Olvar	2010	Himd	
Title of Individua	Certifying Phase II Ap	plication (Board Ch	alrperson or Char	cellor only)	Date of Certification	n (input at the tim	e of signature)	CO CHO THE
						3/15	713	
			× 1, 2				Library A. C.	
SUBM	MIT <u>BOTH</u> A MICROS	OFT EXCEL VERSION	ON OF THIS FULI	WORKBOOK A	ND A SIGNED, SCAN	NED COPY OF TH	IIS PAGE BY EMAIL TO CON.AP	PP@DC.GOV.
SHOP IN		1F 5 54	LE-TAIN	OSSE	Use Only	اعتاروا		
Date Phase II Ann	lication First Received:	ra binamia		0331	Si Estate			